DEC 1 5 2003

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Application Number 10/629,270 **TRANSMITTAL** July 29, 2003 Filing Date **FORM** First Named Inventor **LAFOND** (to be used for all correspondence after initial filing) Art Unit **TBA Examiner Name TBA** Total Number of Pages in This Submission 12

Total Number of Pages	s in This Submission	12 Atto	rney Docket Number	028524.009				
ENCLOSURES (check all that apply)								
Fee Transmittal Form		☐ Drawing(s)		After Allowance Communication to Group				
⊠ Fee Attached		Licensing-rela	ited Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply		Petition		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final		Petition to Co Provisional A		Proprietary Information				
Affidavits/declaration(s)			rney, Revocation orrespondence Address	Status Letter				
Extension of Time Request		Terminal Disc	laimer	Other Enclosure(s) (please identify below):				
Express Abandonment Request		Request for F	tefund of CD(s)	Executed Declaration; \$65.00 check and Return Postcard				
Information Disclosure Statement			· · · <u>— · · · · · · · · · · · · · · · ·</u>					
Certified Copy of Priority Document(s)		Remarks						
Response to Missing Parts/ Incomplete Application			_					
Response to Missing Parts under 37 CFR 1.52 or 1.53								
- ·	SIGNA	TURE OF APPL	CANT, ATTORNEY, O	R AGENT				
Firm or Individual name	Herbert M. Hanegan, Smith, Gambrell & Ru	•						
Signature	Horbert M. Hoeregon							
Date	12/12/03							
CERTIFICATE OF MAILING								
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Typed or printed name Tammie M. Graham Graham Jamme M. 12/12/03 Date

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DEC 1 5 2003

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$

65
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Complete if Known					
Application Number	10/629,270				
Filing Date	July 29, 2003				
First Named Inventor	LAFOND				
Examiner Name	ТВА				
Art Unit	ТВА				
Attorney Docket No.	028524.009				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)						
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order			ヿ	3. ADDITIONAL FEES					
			1	Largo	Entity	Small E	Intitu		
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Deposit	···		- 1	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account		·	- [1051	130	2051	65	Surcharge - late filing fee or oath	. 65
Number				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit				1053	130	1053	130	Non-English specification	
Account				1812	2,520	1812	2,520	For filing a request for reexamination	
Name The Director is outherized to: (check all that graph)				1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
The Director is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application				1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
Charge fee(s) indicated below, except for the filing fee				1251	110	2251	55	Extension for reply within first month	
to the above-identified deposit account. FEE CALCULATION			\dashv	1252	420	2252	210	Extension for reply within second month	
4 54010 51			\dashv	1253	950	2253	475	Extension for reply within third month	-
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	• •	Itility filing fee	1 I	1401	330	2401	165	Notice of Appeal	
1002 340 20	002 170 D	esign filing fee	1	1402	330	2402	165	Filing a brief in support of an appeal	
1003 530 20	003 265 P	lant filing fee	1	1403	290	2403	145	Request for oral hearing	
		leissue filing fee	1	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 20	005 80 P	rovisional filling fee	J	1452	110	2452	55	Petition to revive - unavoidable	
•	SUBTOTAL	(1) (\$) 0	1 I	1453	1,330	2453	665	Petition to revive - unintentional	
				1501	1,330	2501	665	Utility issue fee (or reissue)	
2. EXTRA CLAI		UTILITY AND REISSUE		1502	480	2502	240	Design issue fee	
		Extra Fee from Fee Claims below Paid		1503	640	2503	320	Plant issue fee	
Total Claims		0 X = 0	ı I	1460	130	1460	130	Petitions to the Commissioner	
Independent	≓ · ⊢		i l	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Claims	-3 ** =	0 X = 0	.] [1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent		X = 0		8021	40	8021	40	Recording each patent assignment per property (times number of	
Large Entity	Small Entity							properties)	
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	1	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18	2202 9	Claims in excess of 20		1810	770	2810	385	For each additional invention to be	
1201 86	2201 43	Independent claims in excess of 3						examined (37 CFR § 1.129(b))	<u> </u>
1203 290	2203 145	Multiple dependent claim, if not paid ** Reissue independent claims over		1801	770	2801	385	Request for Continued Examination (RCE)	
1204 86	2204 43	original patent		1802	900	1802	900	Request for expedited examination of a design application	
1205 18	2205 9	** Reissue claims in excess of 20 are over original patent	nd					5	
				Other fee (specify)					
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*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 65									
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SUBMITTED BY		I Go-i-tii No					- 1	Complete (if applicable)	

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

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Telephone

(404) 815-3664

Signature

Date

12/12/03

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